

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		12-10-01
O.I.P.E. CLASSIFIER		1/15	7-11-01
FORMALITY REVIEW	S.H.	1025	6/16/01
RESPONSE FORMALITY REVIEW	TZ	947	10/10/01

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 o ----- Allowed I ----- Interference
 - (Through numeral) ----- Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

Claim	Date
1	1/15/01
2	1/15/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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12-10-01
 10-10-01